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Strengthening of the coordination of humanitarian and disaster relief assistance of the United Nations, including special economic assistance: strengthening of the coordination of emergency humanitarian assistance of the United Nations

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Special economic, humanitarian and disaster relief assistance

Strengthening of the coordination of emergency humanitarian assistance of the United Nations

Report of the Secretary-General

Summary

The present report has been prepared pursuant to General Assembly resolution 46/182, in which the Assembly requested the Secretary-General to report annually to the Assembly and the Economic and Social Council on the coordination of emergency humanitarian assistance. The report is also submitted in response to Assembly resolution 67/87 and Economic and Social Council resolution 2012/3. The period covered by the report is from June 2012 to May 2013.

The report describes the major humanitarian trends and challenges over the past year and analyses two thematic issues: the need to reduce vulnerability and manage risks and the need to promote humanitarian innovation. The report provides an overview of current efforts to improve humanitarian coordination and response, as well as recommendations for further improvement.

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I. Introduction

1. Humanitarian needs exacerbated by civil unrest, human rights violations and conflict during the reporting period are a reminder of the increasingly complex and difficult operating environment in which humanitarian assistance must be delivered and the need for greater adherence to humanitarian principles, timely access to affected populations and better protection of civilians.

2. The global number of internally displaced persons (IDPs) resulting from armed conflict and generalized violence at the end of 2012 was estimated at 28.8 million, an increase from 26.4 million reported in 2011 and the highest figure ever recorded by the Internal Displacement Monitoring Centre. An estimated 2.1 million IDPs were able to return home in 2012; however, around 6.5 million people were newly displaced — almost twice as many as in 2011. Some 17.7 million IDPs were being protected and/or assisted by the Office of the United Nations High Commissioner for Refugees (UNHCR) at the end of 2012. More than 1.1 million people became refugees in the course of 2012, the highest number in more than a decade. The number of refugees under the mandate of UNHCR stood at 10.5 million at the end of 2012.

3. The Centre for Research on the Epidemiology of Disasters recorded 310 disasters in 2012, which claimed an estimated 9,300 lives, affected 106 million people and caused over $138 billion in damages. The significant decrease in the number of people affected from 2011 can be partly explained by the lack of a "mega" natural disaster in 2012. Despite the decrease in fatalities, according to the Internal Displacement Monitoring Centre, an estimated 32.4 million people in 82 countries were newly displaced by natural disasters, almost double the number from 2011. It was also the third consecutive year for economic disaster losses to have exceeded $100 billion.

4. As in previous years, there has been an increase in demand for humanitarian assistance, while the operating environment for delivering such assistance becomes more complex. Humanitarian responders are more numerous and diverse, affected States, regional organizations and neighbouring countries have increased their capacity to respond to humanitarian emergencies, and technological advances are providing a voice to affected people and changing the nature of how assistance is provided. It will be essential over the coming years for the international system to find ways to take full advantage of the opportunities offered by this new environment and how to respond more effectively to its challenges and demands.

II. Overview of humanitarian emergencies

A. Complex emergencies

5. The humanitarian situation in the Syrian Arab Republic deteriorated rapidly, with the number of people in need quadrupling from 1 million in March 2012 to 4 million by the end of the year. As at 26 April 2013, an estimated 6.8 million people were in urgent need of assistance, including around 4.25 million people internally displaced. An additional 1.4 million people have fled the conflict as refugees to Jordan, Turkey, Lebanon, Iraq, Egypt and other parts of North Africa.

6. Conflict in northern Mali, along with the impact of the food and nutrition crisis in the region, has displaced more than 467,000 people since March 2012 (close to 292,700 IDPs and 175,300 refugees in Mauritania, Niger and Burkina Faso). Close to 750,000 people are in need of immediate food assistance, while a further 1.3 million are food insecure. Approximately 4 million people require water and sanitation assistance country-wide, while 2 million are in need of health support; and 200,000 children have no access to education. Military operations, mine incidents and violence by armed groups continue to create a highly volatile environment.

7. In Myanmar, inter-communal violence that broke out in Rakhine State in June and October 2012 resulted in the deaths of 167 people, the injury of 223 others and the destruction of 10,100 private, public and religious buildings. As at 27 March 2013, 125,000 people remained displaced and curfews were still in place in nine locations. Inter-communal violence also broke out in Meiktila, in Mandalay region, on 20 March 2013, resulting in 44 deaths and over 12,000 people displaced. In the Central African Republic, fighting since December 2012 had displaced more than 222,000 people as at 7 May 2013 (173,000 internally displaced and 49,000 refugees to the Democratic Republic of the Congo, Republic of Congo, Cameroon and Chad).

8. The reporting period also saw the intensification of existing complex emergencies and conflicts, causing further displacement. As at 31 March 2013, there were nearly 2.6 million IDPs in the Democratic Republic of the Congo, including 1.6 million in the Kivus, as a result of fighting between Government forces and armed groups such as the 23 March Movement (M23). The conflict also expanded in Maniema and Katanga provinces and had renewed regional implications with waves of Congolese refugees arriving in Rwanda and Uganda. Inter-tribal fighting and conflict between armed groups and the Sudanese Armed Forces in Darfur (Sudan) has led to the internal displacement of approximately 237,000 people and an influx of an estimated 27,000 refugees into Chad. Also in the Sudan, conflict between the Government of the Sudan and the Sudan People's Liberation Movement-North continued in South Kordofan and Blue Nile States, leaving around 1.3 million displaced, including 32,000 refugees in Ethiopia and 197,000 in South Sudan.

9. South Sudan hosts 27,800 refugees from the Democratic Republic of the Congo, Ethiopia and the Central African Republic. In Jonglei State, South Sudan, more than 12,400 people have been displaced by inter-communal fighting since the beginning of 2013, and tens of thousands more are thought to be affected in inaccessible areas. There are still more than 1 million Somali refugees in the Horn of Africa (over 492,000 in Kenya and more than 240,000 in Ethiopia) and 1.1 million IDPs in Somalia.

10. Inter-tribal fighting in Yemen led to the displacement of a further 38,500 people in the north (Hajjah) in 2012. Across the country over 344,000 people remain displaced. While more than 80 per cent of internally displaced people in the south have returned home, only small-scale returns have taken place in the north of the country, where approximately 322,450 people remain displaced. Yemen hosts 242,000 refugees, approximately 95 per cent from Somalia, as well as an estimated 100,000 migrants, mostly from Ethiopia. Clan violence and armed conflict across Mindanao, Philippines, displaced at least 150,000 people in 2012.

11. In Afghanistan, the protracted armed conflict continues to displace people and impact the return of refugees. There are some 534,000 conflict-induced IDPs in

Afghanistan, with more than 81,000 persons having been displaced in the reporting period alone. According to UNHCR, nearly 2.5 million Afghan refugees live in Pakistan and the Islamic Republic of Iran. In 2012, more than 94,300 refugees returned to Afghanistan, approximately 33,000 from Pakistan and 14,800 from the Islamic Republic of Iran, as part of the UNHCR-assisted voluntary repatriation programme (representing a 62 per cent increase from 2011). However, a number of security and political uncertainties related to the ongoing transition are likely to continue challenging further returns and are limiting the country's absorption capacity.

12. In Pakistan, an escalation of hostilities in the Tirah Valley of the Federally Administered Tribal Areas in March 2012 resulted in a new wave of displacement. As at 7 May 2013, UNHCR had registered some 80,000 newly displaced persons. While there continue to be significant returns each year, some 1 million people remain displaced in Khyber Pakhtunkhwa and the Federally Administered Tribal Areas.

13. In November 2012, 100 Palestinian civilians and 4 Israeli civilians were killed in the worst outbreak of violence in the Israeli-Palestinian conflict since Operation Cast Lead in 2009. Despite some adjustments made by the Israeli authorities in recent years, the blockade on the Gaza Strip, now entering its seventh year, continues to cause high levels of unemployment and food insecurity, leaving the majority of people in Gaza aid dependent. The number of demolitions and displacements in Area C of the West Bank, in the Occupied Palestinian Territory, has grown steadily since 2009. In 2012, 886 Palestinians were displaced and 598 Palestinian-owned structures demolished. As at 15 April 2013, 156 structures had been demolished in 2013, displacing 309 people.

14. There was some positive, yet tentative, progress in peace negotiations and the return of displaced persons in several countries. On 7 October 2012, the Government of the Philippines and the Moro Islamic Liberation Front, the country's largest Muslim rebel group, reached a historic peace agreement that set the framework for a final peace accord that seeks to end four decades of armed conflict that has cost 120,000 lives. In Yemen, some 143,000 persons displaced by fighting in the south from mid-2011 to mid-2012 returned to Abyan, but they face a difficult situation owing to extensive damage to civilian buildings and infrastructure, landmines and unexploded ordnance, lack of livelihoods and services and weak rule of law and security. On 18 October 2012, peace negotiations between the Government of Colombia and the Revolutionary Armed Forces of Colombia started in Oslo and continued in Havana. However, since the talks were announced, figures show an increasing trend in hostilities and attacks against infrastructure.

B. Disasters associated with natural hazards

15. Typhoon Bopha, which hit eastern Mindanao, in the Philippines, on 4 December 2012, resulted in the largest loss of life from a natural disaster in 2012. Government sources report that at least 1,900 people were killed or are missing and nearly 233,000 homes were damaged. Over 6.2 million people were affected, including more than 934,000 people who were left homeless. However, owing to preparedness measures, including early warnings, pre-emptive evacuations and pre-positioning of essential stocks and response personnel, it is widely believed that

more lives were saved during Typhoon Bopha than during Tropical Storm Washi in the Philippines in 2011. This was despite Typhoon Bopha having had three times the wind speed and twice the rainfall of Tropical Storm Washi.

16. Although Asia was the continent that experienced the greatest number of natural disasters and the highest death toll in 2012, the Americas endured 63 per cent of the economic losses. That was owed mainly to Hurricane Sandy, which hit the eastern seaboard of the United States of America and the Caribbean region in October 2012, causing over $50 billion in damage, and the drought that affected 62 per cent of the landmass of the continental United States, causing an estimated loss of $20 billion.

17. More than 18 million people across the Sahel region, including an estimated 1.1 million children at risk of severe acute malnutrition, continued to be affected by drought, its impact compounded by chronic poverty, low agricultural productivity and high food prices. Early warning and the rapid mobilization of funds enabled swift humanitarian action in nine countries, mitigating the humanitarian impact. Between June and September 2012, for example, approximately 5 million people received food assistance each month. During 2012, 915,000 children were admitted to therapeutic feeding centres across the Sahel.

18. Nigeria suffered the worst flooding in more than 40 years, with the Government reporting 363 deaths, 2.1 million registered IDPs and an estimated 7.7 million people affected by the floods. Pakistan was again hit by large-scale flooding that affected around 5 million people, causing 473 deaths, injuring 2,900 people and damaging 466,000 houses. Balochistan, Punjab and Sindh provinces were hardest hit. Flooding also struck India, killing over 100 people and displacing over 2 million in Assam in July 2012. In Afghanistan, a number of natural disasters of various scales were recorded during the reporting period, affecting 280,000 people and damaging or destroying 35,000 houses.

19. The earthquake that hit the Islamic Republic of Iran on 11 August 2012 killed more than 300 people and was the most devastating earthquake of the reporting period. On 20 April 2013, an earthquake of magnitude 7 hit the city of Ya'an in the Sichuan province of China. As at 23 April 2013, 193 people were reported dead and approximately 12,200 injured. According to the Civil Affairs Department of Sichuan, approximately 2 million people in 115 counties are affected.

III. Progress in the coordination of humanitarian assistance

A. Strengthening the coordination of humanitarian assistance

Capacity and coordination in the field

20. In 2012, the principals of the Inter-Agency Standing Committee agreed on an action plan outlining clear responsibilities for implementing the Committee transformative agenda recommendations to improve humanitarian leadership, coordination and accountability at the headquarters and field levels. Inter-agency missions to Chad, Myanmar and South Sudan ensured field testing of the new policies and procedures and identified good practice that could be applied to other countries. Five transformative agenda protocols were agreed at the end of 2012 and

an additional three are to be agreed in 2013. They provide practical guidance for field staff to support improved collective action in humanitarian emergencies.[1]

21. In order to ensure that appropriate humanitarian leadership is available from the outset of a large-scale emergency, a roster has been established of 18 Assistant Secretary-General and Director-level candidates from six Inter-Agency Standing Committee agencies who are available for deployment within 72 hours to oversee a large-scale crisis. Effective leadership remains critical in humanitarian emergencies. In 2012, 12 Resident Coordinator and Humanitarian Coordinator positions were filled from the Humanitarian Coordinator pool, a roster of experienced humanitarian leaders supported by the Inter-Agency Standing Committee. To provide additional support to first-time humanitarian coordinators, a mentoring programme was established, with former senior and experienced resident coordinators/humanitarian coordinators who can advise on managerial, structural and strategic issues. The establishment of the inter-agency rapid response mechanism will further support the deployment of senior and experienced humanitarian personnel following a humanitarian crisis.

22. In 2012, efforts continued to improve the collective delivery of results by the United Nations and its partners through effective coordination mechanisms. A survey and analysis of the activated clusters in 25 countries in October 2012 indicated that 78 per cent of clusters now have strategic plans and 81 per cent have coordinated needs assessment. Extending the participation of appropriate government and national actors in clusters, including non-governmental organizations (NGOs), remains a priority. Currently, 75 per cent of clusters have government participation, while national NGOs participate in 90 per cent of established clusters. Regular performance reviews of clusters are taking place to ensure that they remain relevant in evolving situations and are in line with national structures where appropriate. In Burundi, for example, clusters were formally deactivated in August 2012, reflecting a decrease in emergency needs. Support is now provided through government-led sectors.

23. To further implement the commitments of the Inter-Agency Standing Committee to improve accountability to affected people, including through greater transparency, feedback and complaints mechanisms, and participation in programme design, monitoring and evaluation, a number of United Nations agencies have taken steps to better integrate these elements into their programmes and policies. For example, in Pakistan, the World Food Programme (WFP), in collaboration with Transparency International, has established a direct feedback and complaints system with local people using mobile phones, e-mail and post. The system responds to complaints and concerns and provides information about available assistance, which helps WFP make its programming informed, accountable and responsive. WFP has started to replicate this model in other countries, including Afghanistan, Sri Lanka, the Philippines and Kenya.

24. In 2013, the IASC will continue to build upon its commitment to strengthen country preparedness. It is developing a common framework for capacity-building

[1] Although fully supportive of the transformative agenda process, in order to maintain their independence, the International Committee of the Red Cross and the International Federation of Red Cross and Red Crescent Societies, which are not members of, but standing invitees to, the Inter-Agency Standing Committee, are not signatories to the 2012 transformative agenda protocols.

for emergency preparedness, which will combine the efforts of humanitarian and development organizations at the country level to develop, support and complement the capacity of national and local governments and communities to anticipate and prepare for emergencies.

25. Strengthening legal preparedness continues to be essential for the timely delivery of humanitarian assistance. Mexico and Namibia adopted new legal arrangements drawing on the Guidelines for the domestic facilitation and regulation of international disaster relief and initial recovery assistance, and over a dozen States have relevant legislation currently pending. More States need to establish clear rules and procedures to prevent the most common regulatory problems, such as delays in entry permissions for relief personnel, goods, equipment and transport and oversight gaps with regard to the quality and appropriateness of incoming assistance in large international response operations. The Guidelines and their accompanying Model Act can help States to anticipate and avoid such problems.

Broadening partnerships

26. During the reporting period, the United Nations continued to strengthen its partnerships at the global, regional and national levels. In Latin America and the Caribbean, the United Nations has been supporting 29 countries and regional organizations through the Member States-led Enhancing International Humanitarian Partnerships. The Partnerships endeavour to enhance transparency and accountability in mobilizing resources, upgrading information management and strengthening coordination at all levels by fostering alliances among government departments responsible for humanitarian assistance, the private sector and civil society.

27. In partnership with the African regional economic communities, the United Nations is working with African partners to develop emergency rosters, strengthen networks of disaster managers, deploy rapid response teams, disburse humanitarian funds and improve crisis-related information management. The Office for the Coordination of Humanitarian Affairs supported the humanitarian department of the Organization of Islamic Cooperation (OIC), including through outreach and capacity-building work with OIC-affiliated NGOs, in addition to a joint partnership mission to the Niger, Mali and Burkina Faso. In the Asia and Pacific region, the Office for the Coordination of Humanitarian Affairs launched the Asia Pacific guide for disaster managers, a guide to assist national disaster management organizations with regard to available international services and tools to support their response and preparedness capability.

28. Engagement at the global and strategic levels on policy and operational issues has also been strengthened. In May 2012, the Government of Turkmenistan, OIC and UNHCR organized the International Ministerial Conference on Refugees in the Muslim World. Noting that most of the refugees in the world are hosted by OIC member States, the Conference adopted the Ashgabat Declaration urging the international community, in cooperation with UNHCR and other relevant international organizations, to redouble efforts to address the root causes of refugee situations. Member States and the Office for the Coordination of Humanitarian Affairs have also continued to improve dialogue on humanitarian issues, including through the informal dialogue on humanitarian partnership, co-chaired by Sweden and Brazil, and the disaster response dialogue, a joint initiative of Switzerland, the

Office for the Coordination of Humanitarian Affairs, IFRC and the International Council of Voluntary Agencies.

Humanitarian financing

29. In 2012, at least 100 countries, as well as private sector organizations and individuals, contributed towards a total of $12.7 billion[2] in funding both within and outside the consolidated appeals process. This was an overall decrease from recent years, which may be explained by the absence of any "mega" natural disaster. Funding through the consolidated appeals process in absolute terms and in proportion to consolidated appeal requirements was similar to that of 2011: $5.6 billion funded out of $8.9 billion requested (63 per cent) in both years.

30. Member States and the private sector contributed $427 million in pledges and contributions to the Central Emergency Response Fund. These contributions, along with funds transferred from the Central Emergency Response Fund loan window and reserves carried over from 2011, allowed the Emergency Relief Coordinator to allocate some $485 million to implement life-saving activities in emergencies in 44 countries and territories, the highest annual amount allocated since the Fund's inception in 2006.

31. Country-based pooled funds — Common Humanitarian Funds and Emergency Response Funds — received a total of $472 million in donor contributions in 2012. This year, new country-based pooled funds were established in South Sudan and the Syrian Arab Republic. The Common Humanitarian Funds were introduced in 2006 to provide timely and predictable funding to the most critical humanitarian needs as identified in the consolidated appeals process. In 2012, contributions to the five Common Humanitarian Funds reached an all-time high of $386 million, with 58 per cent of total funds allocated to NGOs.

32. In 1997, Emergency Response Funds were established with the purpose of providing humanitarian assistance for new and unforeseen emergency needs through support to international and national NGOs. There are currently Emergency Response Funds active in 13 countries. In 2012, the Funds received $86 million in contributions, allocating 70 per cent to NGOs. A global Emergency Response Fund evaluation conducted during the reporting period found that the Funds can have a valuable role in the humanitarian financing architecture despite the relatively small size of the funds.

33. In order to improve the humanitarian response to protracted crises and promote a response that contributes to building the resilience of vulnerable communities, new multi-year consolidated appeals processes are being piloted. In 2011, a three-year consolidated appeals process for Kenya was issued, and in 2013 a new three-year consolidated appeals process was issued for Somalia with phased objectives and targets that are tailored to the country context with a dual focus on life-saving interventions and resilience-building initiatives. The multi-year consolidated appeals processes will improve transition planning and financing and contribute towards better alignment of humanitarian and development programming. The use of multi-year consolidated appeals processes could be considered for other protracted crises where the situation is unlikely to fluctuate dramatically over an extended period of time.

[2] As recorded by the Financial Tracking Service as at 3 April 2013 at http://fts.unocha.org/.

Information management and needs assessment

34. In response to the increasing volume and scope of data generated in humanitarian emergencies, significant work has been undertaken within the international humanitarian system to develop guidance on best practice in needs assessment and underlying information management. There has also been an increasing awareness of the importance of needs assessment and information management and associated good practice. For example, UNHCR and the United Nations Children's Fund (UNICEF) have both introduced information management strategies, and the response to the release of the IASC Operational Guidance on Coordinated Assessments in Humanitarian Crises has been positive, with both host Governments and humanitarian country teams requesting assistance in customizing and implementing the guidelines. The launch of humanitarianresponse.info and UNHCR regional web portals for refugee response (http://data.unhcr.org) has facilitated the access of humanitarian actors to operational information and relevant resources.

35. While there has been progress in developing guidance for improved information management, challenges still remain in translating this guidance into practice at the operational level. Demand for technically skilled capacity to undertake effective needs assessments and information management in the field widely exceeds current supply. While efforts are being made to address this, more could be done to build the information management capacity of Governments and local NGOs. A data-rich evidence base requires physical access to areas of humanitarian needs, access to data already collected and for datasets to be compatible to enable cross-analysis of information, all of which remain a challenge in many emergencies.

36. Organizations participating in humanitarian action are encouraged to follow data standards, such as the IASC Common Operational Datasets when organizing their data and to provide open access to the data when protection and security concerns allow it. Such measures would facilitate the compilation of a wide range of data into a series of easily consumable information products aimed at decision-makers in emergency situations. These products would directly support national and international responders and affected communities in preparing for and responding to crises.

Improving humanitarian action for all

37. Humanitarian crises do not affect all people evenly. For humanitarian action to be effective, it must be shaped by an understanding of the different needs of women, girls, boys and men, persons with disabilities, adolescents and the elderly to ensure that they have equal access to and benefit from services.

38. The IASC Gender Marker is a practical tool that grades consolidated appeals process projects on how well they ensure that the different needs of women, girls, boys and men are integrated into humanitarian programming. In 2013, the IASC Gender Marker was applied in 16 consolidated appeals processes and five country-based pooled funds, with 52 per cent of the projects identified as having the potential to contribute significantly to gender equality. As the Gender Marker was only mandatory in consolidated appeals processes from 2012, it will be important to ensure that efforts to integrate gender concerns into project design are implemented

and monitored to ensure that humanitarian programmes are benefiting women, girls, boys and men equally.

39. In humanitarian emergencies people can be placed at increased risk of gender-based violence as institutions and systems that provide physical and social protection may be weakened or destroyed. Families and communities are often separated, which can result in a further breakdown of existing community support systems and protection mechanisms. The IASC has scaled up efforts to strengthen gender-based violence prevention and response during humanitarian emergencies. A new rapid response team was deployed on 18 missions in 14 humanitarian emergencies to support humanitarian actors in ensuring that actions to prevent and respond to gender-based violence were addressed across their sectoral programmes. More could be done by Governments and humanitarian organizations to provide and fund specific programmes that address gender-based violence concerns, including counselling, connecting survivors to assistance and providing safety to women and girls in humanitarian emergencies.

40. United Nations agencies have also made progress in integrating the needs of persons with disabilities into humanitarian action. For example, UNHCR adopted its own operational guidelines *Working with Persons with Disabilities in Forced Displacement*, and is providing technical support on disability inclusion to their country operations through partner organizations. UNICEF is also developing a disabilities strategy that will address issues of equity for persons living with disability in humanitarian emergencies. However, while steps are being taken by individual humanitarian organizations, there is a need for standards and guidelines that systematically integrate the needs of persons with disabilities and older people into humanitarian programming. For example, a study conducted by HelpAge International and Handicap International[3] identified that only 1.6 per cent and 0.78 per cent of projects submitted for the consolidated appeals process or flash appeals in 2010 and 2011 included one or more activities targeting people with disabilities and older people, respectively.

41. While progress has been made in the collection of sex, age and disability disaggregated data, more could be done to systematically collect and analyse this data to inform the design, the implementation and the monitoring of humanitarian programming.

B. Strengthening adherence to humanitarian principles and access to populations

Operating in high-risk environments

42. Despite humanitarian workers efforts to strengthen operational security in insecure environments, attacks that have led to death, kidnapping or serious injury continue to exact a heavy toll on humanitarian personnel. Preliminary records of the Aid Worker Security Database for 2012[4] show that the numbers of aid workers killed and seriously wounded decreased by 58 per cent and 18 per cent, respectively,

[3] "A Study of Humanitarian Financing for Older People and People with Disabilities, 2010-2011" (HelpAge International and Handicap International, Lyon, 2012).

[4] Available from https://aidworkersecurity.org/incidents. Figures may change as data collection for 2012 is not finalized.

against the average of the previous 10 years. Kidnappings and the use of explosive weapons in populated areas became the most frequent means of violence against aid workers, with kidnappings increasing by 49 per cent and the use of explosive weapons resulting in the death of 6 aid workers, while 23 others were seriously wounded. This is indicative of a broader concern over the humanitarian impact of the use of explosive weapons in populated areas. Member States, the United Nations and its partners need to identify policy and operational options that might be taken to protect civilians from the short and long-term effects of such weapons.

43. In spite of special protection afforded by international humanitarian law and applicable international human rights law for health care and health-care providers, in many countries attacks or threats directed against health-care personnel, facilities, vehicles and services continue to prevent the wounded and sick from receiving the care and protection they require. From January to December 2012, ICRC documented more than 921 incidents that have affected the delivery of health care to people in need. In 91 per cent of the incidents registered, local health-care providers were directly affected by violence, primarily in the form of threats.

44. In the light of these challenges, humanitarian workers, including health-care personnel, must work together to manage security risks in the most complex environments, including through engagement with communities to build acceptance and trust; by implementing effective security measures that balance risk against the humanitarian imperative; and sharing security information, assets and expertise among humanitarian actors. Host States possess clear formal responsibility for the safety and security of aid workers. More can be done to strengthen coordination between host States and humanitarian organizations to enhance the safety and security of humanitarian personnel while at the same time maintaining humanitarian access in order to reach those in most need.

Humanitarian access

45. Making sure that humanitarian organizations are able to access people in need is fundamental to saving lives. For example, it is essential to move goods and personnel to where they are needed and to ensure that affected people fully benefit from available assistance and protection. In situations of armed conflict, under international humanitarian law the primary responsibility for protecting and meeting the needs of civilians lies with the party under whose control they find themselves. If the party is unable or unwilling to do so, humanitarian agencies can offer their services. Such offers must not be considered as interference in domestic affairs, and consent to relief operations must not be arbitrarily denied. Parties to the conflict must allow and facilitate rapid and unimpeded passage of humanitarian relief for civilians in need. These obligations must be respected, including in situations where the most effective means of achieving rapid access involves humanitarian operations that cross lines of conflict or international borders.

46. The data in the access monitoring and reporting framework of the Office for the Coordination of Humanitarian Affairs shows that the access constraints that were most common in 2012 and that had the most severe consequences for affected people were: (a) restrictions on the movement of humanitarian workers or goods; (b) active hostilities; (c) interference in humanitarian activities; and (d) violence against humanitarian workers.

47. Humanitarian access should not be imposed through the use of force, as association of humanitarian action with armed actors can undermine the neutrality of the response and compromise the safety and access of humanitarian workers and the people they serve. Therefore, humanitarian access needs to be constantly negotiated with all relevant parties. "Humanitarian negotiations" are generally understood as negotiations conducted by humanitarian actors with relevant parties in order to achieve purely humanitarian objectives, such as access to carry out needs assessments, and to provide assistance and protection. Negotiations should not, for example, be confused with or linked to political mediation. Nor should engagement with non-State armed groups for the purposes of humanitarian negotiation be interpreted as conferring any degree of political legitimacy upon such groups.

48. An example of good practice is the new approach to humanitarian access that was implemented by the United Nations and other humanitarian agencies during the polio campaign in Afghanistan (2012/13), in which 11 million children were vaccinated. That approach was based on increasing engagement at the local community level in order to achieve better acceptance of the campaign. As a result, there were improvements in the analysis of local situations, which led to more accurate risk assessments. Another key step was the increased involvement of all sides in negotiating access, which, with better quality and real time information, improved the safety and security of the health personnel involved in the campaign.

49. Despite examples of good practice and the clear obligations imposed by international humanitarian law, access is frequently delayed, impeded or denied. In some cases, the imposition of constraints on access can amount to violation of international humanitarian law. More must be done to ensure accountability for grave instances of deliberate delays or denials of access for humanitarian operations, as well as attacks against humanitarian workers, including through referrals to the International Criminal Court or domestic prosecutions.

Protection

50. The protection of people from harm is a fundamental component of the principle of humanity and therefore a core objective of all humanitarian action. Protection encompasses all activities aimed at securing full respect for the rights of individuals in accordance with international law — international humanitarian law, human rights and refugee law. The aim of protection is to create an environment in which dignity is respected, specific patterns of abuse are prevented or their immediate effects alleviated, and dignified conditions of life are restored.

51. Protecting people from harm requires a comprehensive response from the humanitarian community involving legal, policy, operational and advocacy elements. In situations where people face grave violations of international humanitarian law, human rights law and refugee law, it is particularly critical that humanitarian actors work closely together to ensure a principled and coordinated response. In these situations Member States must also advocate and use their leverage with the relevant parties to advance the protection of civilians.

52. While protection challenges can be particularly acute in situations of conflict, sudden or recurrent natural hazards can also cause or worsen protection problems such as large-scale displacement; gender-based violence; family separation; child trafficking; and unequal access to assistance.

53. During the reporting period, Member States, with the support of United Nations agencies and other humanitarian partners, have taken steps to better address protection concerns, in particular for IDPs. The Special Rapporteur on the human rights of internally displaced persons, Chaloka Beyani, supported Kenya in developing a holistic policy framework and landmark legislation on the protection and assistance of IDPs and other affected communities, which was adopted in 2012. The Philippines similarly adopted legislation on the protection and assistance of IDPs, and Afghanistan is in the process of developing a national IDP policy. In December 2012, the African Union Convention on the Protection of and Assistance to Internally Displaced Persons in Africa, the first regional legally binding treaty on internal displacement, came into force with 17 African countries having ratified the Convention. The treaty applies to displacement generated by a range of causes, including armed conflict, human rights violations, natural disasters and the effects of climate change. Working with the African Union and the African Commission on International Law, UNHCR is currently supporting the development of a model law to assist signatory States to implement the Convention. Member States should continue to address protection concerns, including by providing adequate resources.

Impact of counter-terrorism measures

54. In recent years, humanitarian organizations have grown increasingly concerned about the impact of counter-terrorism legislation and other measures that criminalize the engagement of humanitarian organizations with certain non-State armed groups or that otherwise impede principled humanitarian action. The Office for the Coordination of Humanitarian Affairs and the Norwegian Refugee Council have commissioned an independent study on the impact of national counter-terrorism measures on humanitarian action. The study will include a review of relevant national legislation, an analysis of provisions in funding agreements limiting or imposing conditions on humanitarian activities and a review of how different humanitarian actors have responded to such measures.

IV. Towards a more inclusive, interoperable and effective international humanitarian system[5]

55. The humanitarian operating environment has changed considerably since the international system was created by the General Assembly through its resolution 46/182. Humanitarian caseloads have continued to increase owing to conflict, disasters caused by natural hazards and "chronic crises" in which people who are already vulnerable experience periods of acute vulnerability and humanitarian need. This trend is expected to continue, owing to climate variability, population growth and other demographic changes, including rapid urbanization, financial and energy sector pressures and changing geopolitical factors.

[5] The international humanitarian system can be broadly defined as the network of international humanitarian actors who are functionally connected through the framework for coordination established by the General Assembly in its resolution 46/182 and its subsequent resolutions, which includes the Emergency Relief Coordinator, the Inter-Agency Standing Committee and planning and financing mechanisms, and are guided by a commitment to the guiding principles, humanitarian principles and international law.

56. At the same time, many national Governments and other actors have bolstered their capacities for disaster management over the years, including through developing new regional and national polices and systems for disaster management. This has led to an important shift by humanitarian organizations towards recognizing the more prominent role affected Governments, militaries, local communities, regional organizations and neighbouring countries have, and seek to further develop, in preparing for and responding to emergencies. As more Member States reach middle income status, become donors or providers of in-kind assistance and share their experience and expertise, they are also setting out their interests and expectations of the international humanitarian system. The number of non-governmental organizations operating in humanitarian emergencies has also grown, with the largest recent increases being the number of actors from the global South.

57. In addition, the rise and proliferation of new technologies in crisis-affected countries, including mobile phones and social media, is making it easier for local actors and communities to communicate wants and needs and to self-organize. This change is also bringing important new players into humanitarian response, including local telecommunication companies and Internet service providers, and radically changing the roles of others, such as diaspora groups and volunteers.

58. These changes require the international humanitarian system to continue to adapt current approaches to better work with national and local actors, communities and emerging actors such as the private sector. For example, many of these actors already have in place, or will seek to develop, their own systems and processes for responding to humanitarian emergencies. Given these developments, it will be important for the United Nations and its partners to be able to operate with these new systems and networks in order to maximize use of available capacity, improve overall coordination and together provide humanitarian assistance to more people. In order to improve this "interoperability", the development of new and complementary standard operating procedures between the international humanitarian system and other actors, such as the private sector, the military and the volunteer and technical community, may be required.

Humanitarian effectiveness

59. The international humanitarian system must also ensure it is as effective as possible to meet the challenges resulting from a changing humanitarian landscape. While there is no agreed definition of humanitarian effectiveness, there is strong consensus that the fundamental goal of humanitarian action is to save lives and alleviate suffering. Humanitarian effectiveness is often discussed in terms of transparency, relevance, readiness, performance, speed of response, value for money and accountability to affected countries, people and donors. However, what constitutes "effectiveness" will often depend on the context of the crisis — natural disasters compared to conflicts or situations of chronic vulnerability — and th perspective of the stakeholder (affected people, affected States, donors, humanitarian organizations and other key actors).

60. There is a need to develop a greater understanding of how these different perspectives on what constitutes effectiveness interrelate and how they apply in different humanitarian situations. Such an understanding is important in ensuring that all actors are contributing towards more effective humanitarian action and for

promoting greater accountability. It will be essential to draw upon existing initiatives such as the IASC transformative agenda, the Joint Standards Initiative and the Good Humanitarian Donorship, as well as existing best practice in developing greater understanding.

A. Innovation

Why we need innovation

61. Increasing humanitarian caseloads and the rapid growth of technology is providing new opportunities for innovation in humanitarian action. Ericsson has predicted that there will be 3.3 billion smartphone subscriptions, with the majority of those in the developing world, by 2018. Other new technologies, from advances in water filtration, solar power or 3-D printing, have the vast potential to transform the way humanitarian organizations work, for example, by enabling people in refugee camps to produce life-saving items locally, with minimal logistical and infrastructure implications. But innovation is not just about new technologies or "inventions". It is also about the creation of new products and the adoption of approaches, processes, partnerships and positions, often in combination, that can address systemic challenges.

62. For example, following the 2008 post-election violence in Kenya, humanitarian organizations adopted the use of M-PESA, a nationwide electronic cash service that allowed NGOs, whose food distributions were becoming costly and problematic in an insecure environment, to transfer money through short message service to people in need of assistance. The use of cash transfers — and now mobile cash transfers — has demonstrated how new approaches to distribution of aid can, in appropriate environments, make emergency response faster and more cost-effective, streamline the footprint, improve human dignity and alleviate access constraints. Taking advantage of these innovations and new ways of working will be critical to ensure that humanitarian actors respond with the best partnerships, services, skills and products in a changing world.

63. While innovation is not new to the humanitarian system, most innovations have been ad hoc and the system is often slow to adapt to new ways of working. The increasingly rapid pace of global and technological change has seen an increasing interest in finding ways to systematically increase the pace of innovation and adaption. For example, UNHCR has been developing a Refugee Housing Unit that seeks to find new solutions to creating better living conditions for refugees. It is working with universities, the private sector and foundations. UNICEF has been supporting the development of a Rapid Family Tracing and Reunification (RapidFTR) system through an open source, volunteer-driven project. However, many innovations are piloted but never scaled up or used by the wider humanitarian community.

Supporting humanitarian innovation

64. The challenge for the international humanitarian system in terms of innovation is not in simply doing something novel, but in learning from past experiences (both positive and negative) and applying the lessons learned in a way that improves effectiveness. Enabling greater innovation in humanitarian response will require more investment in research and development to adapt ideas and technologies to

humanitarian uses; organizational reform to create internal structures and cultures that are conducive to implementing innovative practices; learning from practices at the regional and country levels; more involvement of affected people, including adopting more ideas developed by communities themselves; greater involvement of other actors, including the private sector; and the development of standards to ensure that innovative approaches are in line with humanitarian ethics.

B. Reducing vulnerability and managing risks of humanitarian crises

65. Given the changing and interconnected drivers of crisis, Governments, humanitarian and development actors need to work in ways that reduce and manage the risk of crises, rather than simply responding to their impact. This approach requires a better understanding of the drivers of crisis, preventing them from occurring when possible, mitigating the impact when they do occur and promoting sustainable recovery. It also requires deep local knowledge to support the development of practical and effective policies.

Understanding risk and risk management

66. The risk that a humanitarian crisis may occur is a result of both hazards and vulnerability. Hazards are threats to human life and livelihoods and include natural hazards, conflict, technological and industrial accidents, and other shocks, such as food and fuel price spikes. People affected by humanitarian crises may be affected simultaneously by more than one shock or hazard. Vulnerability is the likelihood that an individual or community will suffer adverse effects of being exposed to a hazard. The level of vulnerability of people and communities is a result of many, generally pre-existing, physical, social, economic and environmental factors. Poverty and gender and other forms of inequality are major factors of vulnerability. Poor people are less likely to have the resources to cope in an emergency. Women may be affected differently from men because of gender roles that often determine their social status or family responsibilities. Managing the risk therefore involves addressing hazards, hazard exposure[6] and vulnerability.

67. There are a number of approaches currently being applied by the humanitarian sector and more widely that contribute to managing the risk of humanitarian crises occurring. The "resilience'" approach includes better alignment between humanitarian and development programming to promote sustainable development by better anticipating the conditions that cause crises in order to prevent, better prepare for, respond and recover from them. Resilience encompasses a number of areas, including (a) disaster risk reduction, which seeks to reduce risks associated with natural hazards and climate change; (b) environmental hazard management that addresses technological and industrial hazards; (c) early recovery, which integrates development activities into humanitarian response at the onset of a crisis; and (d) conflict prevention, which aims to reduce the risk of violence and armed conflicts.

68. However, while all these areas seek to contribute to the same outcomes — reduced impact and successful social and economic development — ways of

[6] Exposure is the presence of people, livelihoods and assets in places that could be adversely affected by hazards.

working in the humanitarian and development communities are often not sufficiently aligned to systematically manage the risk of humanitarian crises. For example, a focus on disaster risk reduction may reduce the risks associated with natural hazards, but the overall risk of a humanitarian crisis may only be partially reduced if other hazards, such as threats of conflict or the impact of high food prices on vulnerable communities, are not simultaneously identified, assessed and planned for.

Implementing a risk management approach to humanitarian assistance

69. Applying a systematic and comprehensive risk management approach to crises involves the following steps. First, risk and vulnerability analyses carried out by Governments, development and humanitarian partners must be more closely integrated at the strategic and operational levels. They must also engage Governments, and local actors, particularly those that can assist with addressing the vulnerabilities of "at risk" groups. This requires sharing information, joint risk analysis, investing in capacity to analyse risks and improving trigger mechanisms for responding to increased risks.

70. Second, planning processes by Governments and humanitarian and development partners need to be more closely aligned around common objectives for managing crisis risk. Governments should coordinate planning wherever possible and partners should support capacity-building of national and local counterparts to participate in planning processes. In 2013, United Nations country teams in the Sahel countries will incorporate these two steps in their work with national Governments to develop country-level plans on resilience building. These plans will be underpinned by a joint risk and vulnerability assessment and analysis, and will build upon existing frameworks, policies and plans at the local, national and regional levels to ensure a strategic, coherent and joined-up approach between the Government and humanitarian and development partners at all levels.

71. Third, greater attention must be given to building the capacity of national and sub-national governments and local communities to better prepare, respond and recover from hazards. Early warning systems, social-safety net programmes, contingency planning, livestock and livelihood programmes and risk-proofing essential services such as water, health and education are examples of actions that humanitarian organizations can take to improve national and local capacity. More innovative risk transfer programming, for example, through insurance, should also be used. The R4 Rural Resilience Initiative, a partnership between WFP, Oxfam America and Swiss Re, will enable poor farmers to strengthen their food and income security through an insurance-for-work programme that enables food insecure farmers to work extra days on community disaster risk reduction projects in exchange for a drought insurance policy that will compensate them for losses should a drought occur.

72. Finally, investment for risk management must be increased through national, development and humanitarian channels. Despite evidence that demonstrates that crisis prevention is more effective and cheaper than response, it remains chronically underfunded. According to the Overseas Development Institute, funding for preparedness remains scarce, with little progress made in improving the ability of the international humanitarian system to track disaster risk reduction investment. From the data that is available, preparedness remains a low priority. As recorded by

the Financial Tracking Service, $6.3 billion in humanitarian contributions was provided for the first half of 2012, of which $80.2 million was for emergency preparedness, representing just 1.3 per cent of the total. Data from the Development Assistance Committee of the Organization for Economic Cooperation and Development, which includes a wider category of disaster prevention and preparedness activities, reveals that between 2005 and 2011, $2.4 billion was spent on disaster prevention and preparedness, only 3 per cent of the total spent on humanitarian assistance ($78.3 billion). More needs to be done to increase investment in preparedness at the country level, including through finding more appropriate channels for delivering preparedness financing, and improved systems to track it.

73. A number of processes are under way to identify priorities for the global development agenda beyond 2015, including the post-Millennium Development Goals, the Sustainable Development Goals agenda, and post-Hyogo Framework for Action on Disaster Risk Reduction. The post-2015 development agenda is a unique opportunity to ensure that sufficient priority is given to strategies and programming that can reduce and manage the risk of humanitarian crises. It is also an opportunity to further align humanitarian and development risk analysis and planning processes.

V. World humanitarian summit

74. The Secretary-General has prioritized strengthening humanitarian assistance and promoting humanitarian aid transparency and effectiveness in his Five-Year Action Agenda, with a particular focus on creating an international humanitarian system that is more inclusive. To share knowledge and best practices, the Secretary-General has also called for a world humanitarian summit in 2015.

75. The summit would provide a unique opportunity to bring together a diverse range of humanitarian stakeholders, including affected Member States, affected people, donors, international humanitarian organizations, NGOs, experts and academia to take stock of the changing environment, and agree on how to adapt ways of working and to set an agenda for making humanitarian action fit for the challenges of 2015 and beyond.

VI. Recommendations

76. On the basis of the above, I propose the following:

(a) **Member States, non-State actors and humanitarian organizations to continue to promote greater respect for and adherence to the humanitarian principles of humanity, neutrality, impartiality and independence;**

(b) **Member States and, where applicable, non-State actors to facilitate the rapid and unimpeded passage of humanitarian personnel and relief consignments to affected communities, including by simplifying and expediting procedures for humanitarian personnel and goods;**

(c) **Member States and relevant non-State actors to allow and engage in negotiations for humanitarian operations that are to be carried out in full adherence with humanitarian principles;**

(d) The United Nations and humanitarian organizations to consider the use of multi-year consolidated appeals for protracted crises; Member States and other donors are further encouraged to provide timely, flexible and predictable funding to protracted crises, including through the use of multi-year funding, and to adhere to the principles of Good Humanitarian Donorship;

(e) Member States, the United Nations and humanitarian organizations to continue to build their capacity to collect, analyse and share data, including through the use of data standards such as the IASC common operational datasets, in order to better support national and international planning and response;

(f) The United Nations and humanitarian organizations to continue to integrate preparedness, early action and early recovery approaches in humanitarian programming; Member States and other donors are further encouraged to ensure that preparedness work receives adequate resources, including from both humanitarian and development budgets;

(g) The United Nations and humanitarian organizations to continue to improve the collection and use of sex, age and disability disaggregated data, and to further strengthen the systematic integration of gender analysis and attention to the different needs of women, girls, boys and men, older people and persons with disabilities into humanitarian programming;

(h) Member States and non-State actors to adhere to their legal obligations, raise awareness and support efforts to respect and protect medical personnel, facilities, vehicles and services against attacks or threats, and ensure that the wounded and sick receive the medical care and attention they require;

(i) Member States, United Nations and humanitarian organizations to continue to work together to ensure that the protection needs of affected populations are addressed as a fundamental component of humanitarian response, including through providing timely and adequate resources;

(j) The United Nations to engage in consultations with all relevant stakeholders and review best practice on humanitarian effectiveness and to report back to Member States on progress made;

(k) Member States, the United Nations and humanitarian organizations to continue to assess how innovation can be more systematically identified and integrated into humanitarian action, and share best practices and lessons learned on innovative tools and approaches that could improve the effectiveness of humanitarian action;

(l) Member States, the United Nations and humanitarian and development organizations to improve sharing of information about risks that can lead to humanitarian crises, invest in building the capacity to analyse and communicate such risks and improve mechanisms for joint risk analysis and planning;

(m) Member States, the United Nations and humanitarian and development organizations to continue to build the capacity of national and sub-national governments, local organizations and communities to better prepare for hazards and respond to and recover from disasters.